Fill in this informatio	on to identify your case:	
Debtor 1	Frank Garcia, Jr	
Debtor 2 (Spouse, if filing)	Kathy H Garcia	
United States Bankr	ruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
_	20-09194	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>m 106l</u>	MM / DD/ YYYY

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status*	☐ Not employed	☐ Not employed
	employers.	Occupation	Package Handler	Cashier
	Include part-time, seasonal, or self-employed work.	Employer's name	Fedex Ground Packaging System Inc	Ross Midwest
	Occupation may include student or homemaker, if it applies.	Employer's address	30 Fedex Parkway, 2nd Fl Horiz Collierville, TN 38017	5130 Hacienda Dr Dublin, CA 94568
	How long employed the		nere? 1 year	3 years
			*See Attachment for Addition	nal Employment Information

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 526.50 2,435.33 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 2,435.33 \$ 526.50

Official Form 106I Schedule I: Your Income page 1

Debi	tor 1 tor 2	Frank Garcia, Jr Kathy H Garcia	_	Cas	e number ( <i>if known</i> )	20	-09194
				Fo	or Debtor 1		or Debtor 2 or on-filing spouse
	Cop	y line 4 here	4.	\$	2,435.33	\$	526.50
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	485.33	\$	58.50
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	73.67	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$_	13.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00
	5g.	Union dues	5g.	\$_	0.00	\$	0.00
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	0.00
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	572.00	\$	58.50
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,863.33	\$	468.00
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	
	8e.	Social Security	8e.	\$_	0.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00
	8h.	Other monthly income. Specify: from UPS	8h.+	\$	975.00	+ \$	0.00
		Debtor's sister's contribution to household	_	\$	650.00	\$	0.00
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,625.00	\$	0.00
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,488.33 + \$		468.00 = \$ 3,956.33
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•		
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies					12. \$ <b>3,956.33</b>
12	Do.	you expect an increase or decrease within the year after you file this form	2				Combined monthly income
13.		No.					
		Yes. Explain:					

DODIO! I	Frank Garcia, Jr		00 00404
Debtor 2	Kathy H Garcia	Case number (if known)	20-09194

## Official Form B 6l Attachment for Additional Employment Information

Debtor		
Occupation	Package Handler	
Name of Employer	UPS	
How long employed	5 years	
Address of Employer	55 Glenlake Parkway NE	
	Atlanta, GA 30328	

Official Form 106l Schedule I: Your Income page 3

Fill	in this informa	ation to identify yo	our case:						
Deb	tor 1	Frank Garcia	a. Jr			Che	eck if this is:		
			.,				An amended fil	ling	
	tor 2	Kathy H Gar	cia					showing postpetition cha	pter
(Spo	ouse, if filing)						13 expenses a	s of the following date:	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYY	Ϋ́Υ	
1		0-09194							
(If k	nown)								
O	fficial Fo	rm 106J							
S	chedule	J: Your	 Exper	ses					12/1
Be info	as complete ormation. If m	and accurate as	possible.	If two married people ar					
Par 1.	t 1: Desci Is this a joir	ribe Your House	hold						
١.	□ No. Go to								
		es Debtor 2 live i	in a sonar:	ate household?					
	= 105. <b>20</b> 0		iii a sepair	ate nousenoid.					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	s Does dependent live with you?	
	Do not state							□ No	
	dependents	names.						Pyes	
								□ No □ Yes	
								□ res □ No	
								Yes	
								□ No	
3.	Do vour exi	penses include	_						
0.	expenses o	f people other the	han 👝	No Yes					
	yourself an	d your depende	nts? □	163					
Par Est	imate your ex	nate Your Ongoin	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo	orm as a s	supplement in a	Chapter 13 case to rep	ort
	olicable date.	a date after the i	Jankruptc	y is nied. If this is a supp	iementai S <i>criedul</i> e	J, check	the box at the to	op or the form and fill if	ı tne
				government assistance i luded it on <i>Schedule I:</i> Y					
(Of	ficial Form 10	)6I.)					Your	expenses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	938.52	
	. ,	ded in line 4:	-						
	4a. Real e	estate taxes				4a.	\$	0.00	
		erty, homeowner's	s, or renter	's insurance		4a. 4b.	· —	0.00	
	4c. Home	maintenance, re	epair, and u	ıpkeep expenses		4c.	·	0.00	
F		owner's associat			ma aquitularea	4d.	·	120.00	
5.	Auditional I	nortgage payme	ants for yo	our residence, such as ho	me equity loans	5.	Φ	0.00	

	tor 1 tor 2	Frank Garcia, Jr Kathy H Garcia	Case num	ber (if known)	20-09194
6.	Utiliti	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	214.00
	6b.	Water, sewer, garbage collection	6b.	\$	50.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	and housekeeping supplies	7.	\$	500.81
8.	Child	care and children's education costs	8.	\$	0.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	40.00
10.	Perso	onal care products and services	10.	\$	100.00
11.	Medi	cal and dental expenses	11.	\$	0.00
12.	Trans	sportation. Include gas, maintenance, bus or train fare.			070.00
		t include car payments.	12.	·	270.00
		rtainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
14.	Char	itable contributions and religious donations	14.	\$	0.00
15.	Insur				
		of include insurance deducted from your pay or included in lines 4 or 20.		_	
		Life insurance	15a.	·	0.00
		Health insurance	15b.	·	0.00
	15c.	Vehicle insurance	15c.	\$	197.00
		Other insurance. Specify:	15d.	\$	0.00
	Spec		16.	\$	0.00
17.	Insta	Ilment or lease payments:		•	
		Car payments for Vehicle 1	17a.		0.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify:	17c.	\$	0.00
	17d.	Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report		•	0.00
4.0		cted from your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.		
19.		r payments you make to support others who do not live with you.		\$	0.00
00	Spec		19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on So			0.00
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20e.	·	0.00
21.	Othe	r: Specify:	21.	_+\$	0.00
22.	Calcı	ulate your monthly expenses			
		Add lines 4 through 21.		\$	2,780.33
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	2,700.00
			_	·	0.700.00
	22C. /	Add line 22a and 22b. The result is your monthly expenses.		\$	2,780.33
23.	Calcu	ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,956.33
		Copy your monthly expenses from line 22c above.	23b.	-\$	2,780.33
		,,,,			
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,176.00
24.	For ex	to unexpect an increase or decrease in your expenses within the year after tample, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			ease or decrease because of a
	☐ Ye	es. Explain here:			